

## **NOx Budget Program New Source Allocations (Set-Aside) Application Form Instructions**

Operators seeking allowances for a control period (May 1 through September 30) are reminded the application deadline is January 1 of that year. An application letter requesting NOx allowances should be sent from the unit's Authorized Account Representative (AAR) to the Department at:

SC Department of Health and Environmental Control  
Bureau of Air Quality  
2600 Bull Street  
Columbia, SC 29201

The information will be used by the Department to verify that the unit qualifies as a "new" affected unit. It will also be used to calculate and make the NOx Allowance Allocation.

A NOx Budget Program New Source Allocations Application Form, formatted to meet the informational requests for the typical NOx Budget unit required by S.C. Regulation 61-62.96, has been included along with this document. Please make copies as necessary and complete an Allocations Application Form for each "new" unit.

**New source operators must submit a completed application to receive allocations each year until the unit qualifies for normal block allocations.** For assistance understanding the NOx Budget Program please contact the Bureau of Air Quality at (803) 898-4123.

Operators should also be aware that the number of allowances in the set-aside is limited and units may only receive a pro-rata share if the total requests exceed the set aside. Operators must, therefore, be prepared to acquire any additional allowances they may require from the allowance market. Also note that allowances in an amount equal to any unused allowances must be available for deduction by November 30th.



# NOx Budget Program New Source Allocations (Set-Aside) Application Form

For more information refer to Regulation 61-62.96

Date: \_\_\_\_\_ Control Period: \_\_\_\_\_

## Plant Information

|            |         |               |
|------------|---------|---------------|
| Plant Name | Address |               |
| City       | County  | Permit Number |

## Authorized Account Representative (AAR) and Alternate AAR (A-AAR) Information

|              |                       |       |
|--------------|-----------------------|-------|
| AAR's Name   | AAR's Company Title   |       |
| Telephone    | Fax                   | Email |
| A-AAR's Name | A-AAR's Company Title |       |
| Telephone    | Fax                   | Email |

## NOx Unit Information

|   |                          |
|---|--------------------------|
| <input type="checkbox"/> EGU as defined in 61-62.96.4(a)(1) <input type="checkbox"/> Non-EGU as defined in 61-62.96.4(a)(2) |                          |
| Unit Name   | Unit ID No.              |
| Unit Address  | County                   |
| Commenced Operation - Date  |                          |
| NOx Budget Source Account ID Number   |                          |
| Unit's Maximum Design Heat Input (mmBtu/hr)*:   | <input type="text"/> [a] |
| Unit's Name Plate Capacity (MWe):   | <input type="text"/> [b] |
| Permit Emission Limit (lb/hr)*:   | <input type="text"/> [c] |
| Non-EGU: 0.17 (lbs/mmBtu):  | <input type="text"/> [d] |
| EGU: 0.15 (lbs/mmBtu):  | <input type="text"/> [e] |
| Lesser of 3,672 or Permit Limit - (operating hours):  | <input type="text"/> [f] |
| NOx Allowance request for unit (tons):  | <input type="text"/> [z] |
| EGU: $[z] = [a] \times [e] \times [f] / 2000$<br>Non-EGU: $[z] = [a] \times [d] \times [f] / 2000$                          |                          |
| <i>*Note: If the unit is a gas turbine, use heat input (higher heating value) and emissions at ISO conditions.</i>          |                          |

Signature of Authorized Account Representative

Date

\_\_\_\_\_

\_\_\_\_\_